



OXNARD SCHOOL DISTRICT

1051 South "A" Street • Oxnard, California 93030 • 805/385-1501 • www.oxnardsd.org

APPLICATION FOR WELLNESS

Name _____ Date of Request _____

Site _____

Day(s) Requested _____

Type of Professional Growth (Please Check):

Positive Psychology _____

Mindfulness or Similar Meditative Practices _____

Traditional Relaxation Practices _____

Psychoneuroimmunology _____

Other (Brief Description) _____

Employee Signature

Supervisor Signature

Revised 11/8/18